

How the Pandemic Changed The World: Global Perspective

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Introduction

On behalf of the World Council of Churches² acting general secretary, Rev. Prof. Dr Ioan Sauca, I bring greetings to the 13th Mission Synod 2022, in the name of the Triune God: the creator, redeemer, and sustainer of all life. I am grateful to the organisers for inviting me to speak about “How the Pandemic Changed the World: Global Perspective” within the general theme of the Synod 2022: *Living, Healing, Sharing: Together for our World*. This theme speaks to signs of our times considering what the world is still going through since 11 March 2020 when the World Health Organization (WHO) declared COVID-19 a pandemic.

The pandemic has changed the world as we knew it many ways. It has demonstrated the fragility of our world and has laid bare risks ignored for decades, including inadequate health systems, gaps in social protection, structural inequalities, environmental degradation, the climate crisis and armed conflicts. Entire regions that were making progress towards eradicating poverty and narrowing inequality have been set back years in a matter of months. The purpose of this paper is to analyse how the pandemic has changed the world and how the churches have responded to the changes informed by missiological and diaconial gospel imperatives. Examples will be drawn from the work of the World Council of Churches, a global organisation and a fellowship of churches, to highlight actions taken to respond to the changes brought by the pandemic.

COVID-19 pandemic: A summary of the global changes

The COVID-19 pandemic has had an immense impact on every sphere of life. Globally, as of 6:37pm CEST, 5 May 2022, there have been 513,384,685 confirmed cases of COVID-19, including 6,246,828 deaths, reported to WHO.³ However, on the same day, the World Health Organization estimates that nearly 15 million people were killed either by coronavirus or by its impact on overwhelmed health systems during the first two years of the pandemic, more than double the current official death toll of over 6 million.⁴ The death of so many people brought with it fear and grief. The neglected health care facilitators in many developing countries have been exposed.

Whilst the majority of patients with COVID-19 have recovered, the human cost of the pandemic has been – and continues to be – severe and tragic; every death represents a tragedy of incalculable loss to family and friends. In many cases, an individual’s death may lead to a loss of income for a

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² The World Council of Churches (WCC) is a global expression of the modern ecumenical movement. As a fellowship of 352 Orthodox and Protestant churches present in more than 120 countries, the WCC engages in a quest for common witness to the good news of Christ, service to all the world’s people, interreligious dialogue and cooperation, theological formation, and spiritual renewal.

³ WHO Coronavirus (COVID-19) Dashboard “<https://covid19.who.int/> 5 May 2022.

⁴ <https://www.who.int/news/item/05-05-2022-14.9-million-excess-deaths-were-associated-with-the-covid-19-pandemic-in-2020-and-2021>.

family with consequent implications of increasing poverty, including potentially depriving people of home, livelihood, healthcare, and food. At the start of 2022 before the Russia-Ukraine war, there were already 276 million people facing acute hunger in 81 countries served by World Food Programme. This is a record high and an increase of 126 million people compared to before the COVID-19 pandemic.⁵ This is happening in a context in which nearly 690 million people (8.9 per cent of the global population) go hungry each day and night, and 2 billion people (26.4 per cent of the world population) experience a combination of moderate and severe food insecurity.⁶ The situation is adding a burden for the 1.8 billion people who currently have to depend on a source of drinking water contaminated (23 percent of the global population) and the 2.5 billion people who lack access to improved sanitation (35 percent of the global population).⁷ COVID-19 has proven to be much more than a health crisis. While the impact varies from country to country, the pandemic has created social and economic disruption that has increased poverty, especially in contexts where the informal economy is widespread. Already, vulnerable groups have been the most impacted.

The pandemic has also shown the frailty and inadequacy of the global economic system. Countries already struggling with limited resources are now even more acutely affected. The hubris of modernity and ideas of unlimited progress have been shattered. The COVID-19 pandemic follows almost exactly a century after the global influenza pandemic.

During COVID-19 the world has also witnessed terrible atrocities and seen powerful protests against the inequalities that white supremacy supports and that racism fuels, as the world hears the prophetic voices that proclaim that “Black Lives Matter.” Racism, discrimination and xenophobia take different forms in different parts of the world. Police brutality is everywhere even as lockdown laws are being enforced without consideration that inequality means that some people cannot self-isolate because of there is not enough space in the homes. It is also insensitive to the informal traders, the majority of whom are women, whose income was cut short and can no longer feed their families.

The emergence of COVID-19 as a global life-threatening pandemic resulted in exploration of palliative and preventative measures to contain the virus and reduce loss of life. What ensued was the establishment of physical distancing and “lockdown” measures in most countries. It was soon very evident—from anecdotal and documentary evidence—that COVID-19 and the subsequent containment measures served to exacerbate the silenced pandemic of sexual and gender-based violence globally. This was manifest in physical, mental, and sexual ways, as women and children were often hardest hit by the impact of the virus on their lives, livelihoods and quality of life. From as early as March 2020, mere days after the declaration of the pandemic, research facilitated by UK Aid’s help desks on violence against women and girls indicated that the pandemic was expected to have negative impacts in the following ways:

- *Increased risk of domestic violence.* This conclusion was based on reports of a tripling of domestic violence in China during the epidemic.

⁵ Global Report on Food Crises - 2022, <https://www.wfp.org/publications/global-report-food-crises-2022>.

⁶ “The State of Food Security and Nutrition in the World 2020,” Food and Agriculture Organization of the United Nations website, <http://www.fao.org/3/ca9692en/online/ca9692en.html>.

⁷ Lisa Guppy and Kelsey Anderson, *The Global Water Crisis: The Facts* (Hamilton, Ontario: United Nations University Institute for Water, Environment and Health, 2017), <https://inweh.unu.edu/wp-content/uploads/2017/11/Global-Water-Crisis-The-Facts.pdf>.

- *Diminished access to resources.* The report further warned that “The COVID-19 outbreak has also curtailed access to support services for survivors, particularly in the health, police and justice sector. There is also some evidence that authorities have converted women’s shelters into homeless shelters.”
- *Increased vulnerability of transgender women.* The “End Violent Encounters” blog on the intersection of domestic violence on LGBTQIA persons asserts:

The UN Women has also pointed out that women are at increased risk of infection because they are the majority of frontline workers, and loss of livelihood, and existing trends point to less access to sexual and reproductive health and rise in domestic violence during crisis.⁸

Despite COVID-19 measures shifting from country to country in the light of the second, third, and fourth waves and multiple mutations of the virus, sexual and gender-based violence remains a threat to the physical, emotional and mental health of humanity.

Youth and children have also been affected by COVID-19 in a specific way. The inability of many children to participate in formal education – particularly where computer and communications facilities are absent – may lead to long-term educational disadvantage and consequent lack of essential skills for future employment. The closure of schools due to the pandemic also is causing 370 million children (of the 1.3 billion who are out of school) to miss school meals and is limiting their access to nutritious food and health support schemes. For many children, these are the only meals they can count on.⁹

In many countries of the global South, it is not only the disease and its medical and health-related impacts causing concern and heavy social costs; even more impactful are the side effects of approaches such as lockdowns that are often enacted without close consideration of the social and economic consequences. In Nigeria, hundreds of schools were closed, prices for daily food increased four to six-fold, and part of the population is effectively threatened by starvation. This may take a heavier toll than the immediate health-related repercussions of the pandemic.

The COVID-19 pandemic media coverage has reduced global media coverage of other serious problems. For example in the global South, the general feeling was, despite the challenge of COVID-19, prevalent diseases – such as AIDS, Sahel meningitis, Lassa fever, Ebola and malaria – must not be overlooked. These diseases combined have killed more people in Africa than COVID-19.

The COVID-19 pandemic has highlighted the comparative lack of vaccine research and manufacturing in the global South. Dependency on importing medicines presents major supply, logistical, and financial challenges, as highlighted by the African Vaccine Manufacturing Initiative (AVMI).¹⁰ Therefore, we have seen how some rich countries have bought enough vaccines for their populations to receive up to six vaccines as is the case of Canada while others can only afford to receive the COVAX vaccines even if it means receiving 500000 for say a population of 17 million as has been the case of Malawi. This highlights inequality in vaccine distribution.

The effect on the targets set by the UN Sustainable Development Goals (SDGs) 2015–2030 cannot yet be measured or envisaged. However, the world is not on track to achieve the ambitious 2030 sustainability agenda, not to mention the internationally agreed climate agreements and

⁸ <https://www.unwomen.org/en/news/in-focus/in-focus-gender-equality-in-covid-19-response>.

⁹ “WFP and UNICEF Joint Response to Covid 19,” World Food Programme website, <https://www.wfp.org/school-health-and-nutrition>.

¹⁰ African Vaccine Manufacturing Initiative website, <https://www.avmi-africa.org>.

environmental goals for 2050. It is only likely that pandemics such as COVID-19 will be repeated or even reoccur more often should the global community fail in the SDGs agenda. Churches and all people of goodwill cannot allow the SDGs to be forgotten or downplayed.

The faith community has been affected by COVID-19 too. The faith community was changed in two ways: On one hand, when the COVID-19 pandemic came with its preventative protocol that required lockdowns, distancing, washing hands and wearing masks, it found the churches unprepared to give sound biblical and theological guidance to their members and the society on how to "read the signs of our times." For the faith communities, with lockdowns in place, challenges included: access to places of worship, how to minister to the faithful from a distance, how to celebrate Christmas, Easter, Holy Communion, bury the dead, baptise etc. Wrong theology and use of scriptures to interpret the signs of our times, which was already there, increased on social media. There has been bad theology as to why there is COVID-19 pandemic. Some have described it as a punishment from God because of homosexuality. This kind of theological interpretation is similar to the initial reaction of the faith community to the onset of HIV and AIDS. Over the decades, most churches have changed their theological conclusions that HIV is a punishment from God. As a result of the bad theology, there was also vaccine hesitancy which was accompanied by bad theology and misleading information. Where such misinformation existed in the church circles, many church leaders died. It is important to understand that where church leaders chose to continue their ministry as if COVID did not exist, there was also an economic reason that perpetuated such misinformation and mis-action. No church services means no income for the church personnel to be paid and pay bills.

Missiological and diaconal imperatives in the COVID-19 response

The WCC document, *Together Towards Life*, gives directions on how and why Christians ought to respond in world rapidly changing landscapes. It says:

God invites us into the life-giving mission of the Triune God and empowers us to bear witness to the vision of abundant life for all in the new heaven and earth... Mission begins in the heart of the Triune God and the love which binds together the Holy Trinity overflows to all humanity and creation. The missionary God who sent the Son to the world calls all God's people (John 20:21), and empowers them to be a community of hope. The church is commissioned to celebrate life, and to resist and transform all life-destroying forces, in the power of the Holy Spirit.¹¹

Thus, we cannot overcome the COVID-19 crisis in isolation. We can only cope with the pandemic if we stand together in solidarity and remember the message of St Paul in 1 Corinthians 12:12 that we are "one body."¹² Solidarity should go beyond the local context as the pandemic dramatically impacts vulnerable populations in every society. It is crippling the lives and livelihoods of societies and countries already disadvantaged socio-economically. Therefore, assistance, empowerment, advocacy, and accompaniment have to be boosted.

¹¹ Jooseop Keum ed. *Together towards Life: Mission and Evangelism in Changing Landscapes*. Geneva: WCC Publication, 2013, Page 1.

https://www.oikoumene.org/sites/default/files/File/Together%20towards%20Life_2nd%20pages_print%20IMP%2080%20b%20proof_SAMPLE.pdf.

¹² "Dr Beate Jakob: 'We are One Body,'" 15 April 2020, World Council of Churches, at: <https://www.oikoumene.org/en/press-centre/news/dr-beate-jakob-we-are-one-body>.

Another study document of the WCC, *Called to Transformation – Ecumenical Diakonia*, makes a connection between mission and *diakonia*, which is crucial for a faith-based response to changes brought by COVID-19. It says:

‘The ecumenical movement is carried by the conviction that unity and sharing are intimately interrelated as God’s gracious gift and vocation. At the same time, this commitment to unity and sharing cannot be limited to the life of the churches and their wellbeing. It is a calling to serve in the world, participating in God’s mission of healing and reconciliation, and of lifting up signs of hope, announcing by word and deed God’s reign, its justice and peace.’

Jesus’ parable of the Good Samaritan (Luke 10:25-37) helps us to reflect further on service in the world as we participate in God’s mission. Jesus tells this story in the context of the command to love one’s neighbour. The person who stopped and helped was a Samaritan – coming from a community that had been in dispute with Jesus’ community about religious identity, the correct way to worship, and the right to participate in political matters for centuries. In the context of the pandemic, the parable is an invitation to reflect on the need to transcend boundaries in one’s service to, and solidarity with, the suffering. It is also a call to overcome the negative assumptions we may hold and recognize with humility and gratitude that the “other” may show us the true meaning of service and solidarity.¹³

Global faith responses to the COVID-19 changes

The Constitution of the World Council of Churches defines *diakonia* (service) as an integral dimension of its vision and life; Article III states,

The primary purpose of the fellowship of churches in the World Council of Churches is to call one another to visible unity in one faith and in one Eucharistic fellowship, expressed in worship and common life in Christ, through witness and service to the world, and to advance towards that unity in order that the world may believe.

It further reads:

In seeking *koinonia* in faith and life, witness and service, the churches through the Council will: ... express their commitment to *diakonia* in serving human need, breaking down barriers between people, promoting one human family in justice and peace, and upholding the integrity of creation, so that all may experience the fullness of life.

In the two years since the pandemic started, the World Council of Churches has, while working remotely, reoriented its work to equip the world’s churches to address the healthcare and pastoral challenges posed by the pandemic and to minister in the presence of illness, death, and enormous disruption everywhere.

Since churches and the WCC are historically heavily identified with health and healing, a Ministry Support Team was rapidly assembled to field the many pastoral questions and concerns that have arisen in local and regional settings. The team of nine resource people, with expertise in different programmatic areas, was available to consult on how churches can discern their roles during the coronavirus pandemic, how they can adapt as faith communities, and how they can connect and

¹³ “Serving a Wounded World in Interreligious Solidarity: a Christian Call to Reflection and Action During Covid-19 and Beyond,” 27 August 2020, World Council of Churches and Pontifical Council for Interreligious Dialogue, at: <https://www.oikoumene.org/en/resources/documents/wcc-programmes/interreligious-dialogue-and-cooperation/serving-a-wounded-world-in-interreligious-solidarity-a-christian-call-to-reflection-and-action-during-covid-19>.

share with each other. This service quickly became a ready and much-used resource for churches, pastors, and individuals around the world.

Given that staff travel and conferences were suddenly out of the question, much of the effectiveness of the WCC in this period stemmed from its rapid development of communications vehicles that could share stories from the wider fellowship, report on COVID-19-related initiatives, and highlight good practices among churches responding to COVID-19. They have brought to light concrete examples of how faith communities are and can be adapting. News and stories have been undergirded by a robust set of COVID-19 resources for churches and individuals. Visits to the WCC website increased.

At the same time, digital innovations have also enabled the WCC's many programmes to work together virtually with their key constituencies, often on COVID-related issues. The result has been a plethora of webcasts, podcasts, blogposts, and webinars exploring not just the immediate healthcare and ministerial challenge of the pandemic but also its implications for rethinking related issues of social justice, human rights, racial and gender equality, violence against women and children, and good governance.

Further, a number of important publications have been produced, focusing particularly on equipping the fellowship to respond to the challenges brought by the COVID-19 pandemic. An Ecumenical Global Health COVID-19 Response Framework laid out parameters of care. A joint statement on *Serving a Wounded World in Interreligious Solidarity: A Christian Call to Reflection and Action during COVID-19 and Beyond* was issued with the Pontifical Council for Interreligious Dialogue. And *Healing the World: Eight Bible Studies for the Pandemic Era* invited Christians to wrestle with their fear, grief, and uncertainty from within a biblical perspective. A special virtual issue of the WCC journals further focused on the pastoral and theological challenges posed by the pandemic.

Enhanced use of social media in this period has amplified the message of the WCC but, as important, really engaged people, especially in campaigns of solidarity and spirituality. The WCC's identity as a fellowship united in prayer and service has been made more visible through the publication of daily morning prayers and weekly prayer texts contributed by members of the fellowship, both widely shared in social media and beyond.

In short, despite the formidable challenges that the pandemic has posed to the WCC, its effectiveness as a convenor of the worldwide fellowship of churches, as a catalyst for public witness, and as a community working in solidarity for justice and peace has, in many respects, actually been enhanced during these straitened circumstances.

In 2021, the WCC appointed nine church leaders to join the 300 other "Vaccine Champions" mobilized by UNICEF, to raise awareness of the benefits of vaccination, to counter misinformation, and to nurture trust in the vaccination programmes. As COVID-19 vaccination programmes are being rolled out, religious leaders of all faiths play a critical role in sustaining public trust in health authorities and services, as well as in the approved vaccines themselves. As a Christian fellowship, it is our duty and moral obligation to publicly challenge rumours and myths and confront them with facts. While moral and ethical concerns also loom over vaccine access and distribution practices, we must take up responsibility and advocate for what is right from a medical, ethical and human rights perspective.

Indeed, even earlier, the WCC joined with the World Jewish Congress in a joint statement inviting religious leaders of all traditions and locations to reflect on and engage the myriad of ethical issues related to global vaccine distribution.

On this basis and at this juncture in the pandemic, the WCC, through its executive committee, has strongly condemned the global injustice and inequities emergent in the pandemic. It has urged sharing and administering vaccines, sharing technology, overcoming skepticism, and rescuing those whose lives and health have been upended by the pandemic. It has called on governments, agencies, religious leaders, boards and leaders of corporations with ownership of patents and materials — to exercise leadership and act together urgently to ensure broad, rapid, equitable, and affordable distribution of therapeutics and vaccines worldwide, to overcome this failure and to right this wrong.

Such efforts dovetail well with the international efforts of the WHO. The executive committee appealed for the compassionate sharing of technology and know-how, to enable manufacturers in hard-hit countries in the global South to produce vaccines for their people and others. “We urge greater support for and contributions to the WHO COVID-19 Technology Access Pool (C-TAP) as a key instrument for this purpose, and to the COVAX facility for more equitable distribution of available vaccine supplies,” their statement said. “We recognize that, beyond issues of supply and distribution of vaccines, other factors have intensified the impacts of the pandemic and as yet stand in the way of an exit from this crisis.”

Recognizing the trust placed in the church, especially in times of crisis, the World Council of Churches has not taken threats to women’s and girls’ well-being lightly. A basic guide for addressing gender-based violence in a COVID-19 context has been prepared and is uploaded on the WCC website. The guide affirms that the World Council of Churches assumes a multi-faceted approach to addressing the problem of sexual and gender-based violence, by inviting engagement through accompaniment and action. The Thursdays in Black ambassadors, who are church leaders, lead in the resistance of sexual and gender-based violence by producing Bible study materials for churches to use.

Conclusion

The fundamental learning from this pandemic has been of our shared vulnerability—and shared fate—as one humanity. We now feel more keenly the fragility of human life—indeed, of all life on this planet. Now we all more consciously value the deep connections we share with each other in family and community, nation and world. We now show a new openness to admitting and confronting historic injustices, and a new moral reckoning on race, class, and gender. We also more readily acknowledge and celebrate the concerns and insights of women, youth, Indigenous peoples, and those who are routinely victimized by our systems of economy and systems of healthcare, immigration, asylum, and policing. In such ways, perhaps the pandemic will seed a new readiness for real social change and commitment to our one humanity in this one world. Let us build on that!

For that, I believe, we need a calm, reassuring faith in humanity, a realistic hope for the future, and a steadfast love that is active and all-inclusive. In partnership with all churches, people of other faiths and with all people of good will, we in the global fellowship of churches from all over the world hope to contribute to that vital endeavor.